

# Committee for Political Action (PAC) Registration Form

State of Nevada

Print or type the following information; complete both sides of this registration form:

**REGISTRATION:** (check one) ☒ New registration | | Amended registration (if amended, list reason)

**REASON FOR AMENDMENT:** ☐ Change in officers | | Change resident agent  
☐ Other \_\_\_\_\_

**NAME OF COMMITTEE:**

NORTHERN Lincoln County

**Mailing Address:**

METHAMPHETAMINE PAC

Caliente NV 89008 (435) 896 3932  
City State Zip Telephone

**PURPOSE:** (Briefly state the purpose for which the political action committee was organized.)

From May 2007 forth ~~EDUCATION~~ <sup>(A) OVERSIGHT</sup> - Meth  
~~(B) CORRUPT LINCOLN COUNTY LAW ENFORCEMENT & CONTRACT INFORMANTS~~

**RESIDENT AGENT:** (Pursuant to NRS 294A.240, each committee for political action must appoint and keep in this state a resident agent who must be a natural person who resides in the State of Nevada.)

**Name of Resident Agent:**

BILL HARTMAN

**Mailing Address:**

HCR 34 BOX 22

Caliente NV 89008 (435) 896 3932  
City State Zip Telephone

## ACCEPTANCE OF APPOINTMENT BY RESIDENT AGENT

I, Bill Hartman, hereby accept appointment as Resident Agent for the  
above named committee for political action.

Bill Hartman  
Signature of Resident Agent

9-24-07  
Date

**FILED**

SEP 24 2007

SECRETARY OF STATE  
ELECTIONS DIVISION

NLCMeth

**OFFICERS:**

(Please list the name, title, address and telephone number of each officer.)

BILL HARTMAN

Name

CHIEF Political Officer

Title

Telephone Number

HCR 34 Box 22

Address

Caliente, NV 89008

City/State/Zip

Name

Address

Title

Telephone Number

City/State/Zip

Name

Address

Title

Telephone Number

City/State/Zip

Name

Address

Title

Telephone Number

City/State/Zip

Name

Address

Title

Telephone Number

City/State/Zip

**AFFILIATIONS:**

(If the committee for political action is affiliated with any other organizations, list the name, address and telephone number of each organization.)

Name of Organization:

Address:

Telephone No.:

**Submitted By:**Bill Hartman

Name of representative of group

9/24/07

Date

Send Completed Form to:  
**SECRETARY OF STATE**  
**101 NORTH CARSON STREET #3**  
**CARSON CITY, NEVADA 89701-4786**

**PHONE: (775) 684-5705 FAX: (775) 684-5718**